Case 17-12138-SDM Doc 6 Filed 06/23/17 Entered 06/23/17 13:47:00 Desc Main

		17/7/41111	.II	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Dewey Anthony I	Lee		
	First Name	Middle Name	Last Name	
Debtor 2	Valerie M. Lee			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN MISSISSIF	PPI DISTRICT	
Case number	17-12138			
(if known)				Check if this is an amended filing

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	125,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	68,682.50
	1c. Copy line 63, Total of all property on Schedule A/B	\$	193,682.50
Par	t 2: Summarize Your Liabilities		
			abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	167,163.05
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	3,500.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	55,248.67
	Your total liabilities	\$	225,911.72
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,399.68
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,984.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "insurred by an individual primarily for		family as

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Dewey Anthony Lee
Valerie M. Lee

Case number (if known) 17-12138

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,089.39

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	3,500.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	33,927.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	37,427.00

	Case	e 17-12138-S	DIM DOC 6			d 06/23/17 Entered 06/2 ument Page 3 of 47	3/17 13:4	7:00	De	sc Main
ŦIII	in this info	rmation to identify	your case and th							
Deb	otor 1	Dewey Anth	ony Lee							
		First Name		Name		Last Name				
	otor 2 use, if filing)	Valerie M. Lo		Name		Last Name				
					· CIG					
Unit	ied States E	ankruptcy Court for	the: NORTHER	IN IVIIOS	010	SSIPPI DISTRICT				
Cas	se number	17-12138								Check if this is an
										amended filing
~ .	<del>.</del> .	4004/5								
_		orm 106A/E	-							
<u>30</u>	chedu	<u>le A/B: Pı</u>	roperty							12/15
						only once. If an asset fits in more than one narried people are filing together, both are				
nfor		re space is needed,				s form. On the top of any additional pages				
	_									
Part	1: Describ	e Each Residence, B	uilding, Land, or Ot	her Real	al E	state You Own or Have an Interest In				
. Do	o you own oı	have any legal or eq	uitable interest in a	ny resid	ide	nce, building, land, or similar property?				
	No. Go to P	art 2.								
	Yes. Where	is the property?								
1.1	4007.14			What	at i	s the property? Check all that apply				
		Ing Crossing Ros, if available, or other des				Single-family home				or exemptions. Put
	Circoi addico	, ii available, e. e.i.e. aee	o.,po		_	Duplex or multi-unit building Condominium or cooperative		amount of any secured claims on Schedule D: editors Who Have Claims Secured by Property.		
					]	Condominant of Cooperative				
					]	Manufactured or mobile home	Current valu	e of the	Cı	rrent value of the
	Louisvill		39339-0000		=	Land	entire prope	•	ро	rtion you own?
	City	State	ZIP Code		_	Investment property Timeshare	\$125	5,000.00	_	\$125,000.00
					_	Other				wnership interest by the entireties, or
					_	as an interest in the property? Check one	a life estate)	, if known.	-	
	14/:				_	Debtor 1 only	Fee simple	e subject	to	Deed of Trust
	Winston					Debtor 2 only				
	County				_	Debtor 1 and Debtor 2 only			mun	ity property
				Othe		At least one of the debtors and another nformation you wish to add about this iter	see instructions. Such as loca	,		
						ty identification number:	., 040 40 .00.			
				5 Be	3ec	drooms, 3 Baths, Brick, 2 Acres				
2	Add the de	llar value of the se	ortion you own to	r all of	f v	our entries from Part 1 including one	antries for			
		har value of the po				our entries from Part 1, including any	entities for			\$125,000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

pages you have attached for Part 1. Write that number here.....=>

page 1 Official Form 106A/B Schedule A/B: Property

Part 2: Describe Your Vehicles

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Debtor 1 Debtor 2	Dewey Anthony Lee Valerie M. Lee		Case number (if known)	17-12138
. Cars, va	ans, trucks, tractors, sport utility ve	ehicles, motorcycles		
□ No				
■ Yes				
3.1 Mak	<sub>ke:</sub> Toyota	Who has an interest in the property? Check one		red claims or exemptions. Put secured claims on <i>Schedule D</i> :
Mod	del: <b>4Runner</b>	☐ Debtor 1 only	Creditors Who Hav	e Claims Secured by Property.
Yea		Debtor 2 only	Current value of the	ne Current value of the
	proximate mileage: 58000	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
	ner information:	☐ At least one of the debtors and another		
VIN	N#: JTEZU5JR5D5061726	☐ Check if this is community property (see instructions)	\$28,507.	\$28,507.50
3.2 Mak	0::	Who has an interest in the property? Check one ☐ Debtor 1 only	the amount of any s	red claims or exemptions. Put secured claims on Schedule D: e Claims Secured by Property.
Yea		Debtor 2 only	Current value of the	ne Current value of the
	proximate mileage: <b>75000</b>	Debtor 1 and Debtor 2 only	entire property?	portion you own?
Oth	er information:	At least one of the debtors and another		
		☐ Check if this is community property (see instructions)	\$11,677.	\$11,677.50
3.3 Mak	ke: <b>Toyota</b>	Who has an interest in the property? Check one		red claims or exemptions. Put secured claims on Schedule D:
Mod		☐ Debtor 1 only		e Claims Secured by Property.
Yea	05000	Debtor 2 only	Current value of the	
	proximate mileage: <b>85000</b> per information:	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
	W#: 4T1BF1FK2EU307400	☐ At least one of the debtors and another		
- 1	n Drives	☐ Check if this is community property (see instructions)	\$12,172. ———	\$12,172.50
		nd other recreational vehicles, other vehicles atercraft, fishing vessels, snowmobiles, motorcyc		
		vn for all of your entries from Part 2, including that number here		\$52,357.50
Part 3: De	escribe Your Personal and Household I	tems		
Do you o	wn or have any legal or equitable ir	nterest in any of the following items?		Current value of the portion you own?  Do not deduct secured claims or exemptions.
<i>Examp</i> □ No	nold goods and furnishings  bles: Major appliances, furniture, linens  Describe	s, china, kitchenware		

Official Form 106A/B Schedule A/B: Property page 2

Case 17-12138-SDM Doc 6 Filed 06/23/17 Entered 06/23/17 13:47:00 Desc Main Debtor 1 Dewey Anthony Lee

Case number (if known) 17-12138

	Living Room Furniture (600.00), Bedroom Furniture (1200.00), Dining Room Furniture (300.00), Refrigerator (300.00), Stove (150.00), Washer/Dryer (500.00), Microwave (25.00), Riding Mower (500.00), Fireplace (250.00), Outdoor Furniture (500.00)  Personal Items Value<200.00 Exempt: Push Mower (150.00)	\$4,475.00
	sions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; mu ng cell phones, cameras, media players, games	sic collections; electronic devices
	TV (250.00)  Personal Items Value<200.00 Exempt: 2nd TV (150.00), 3rd TV (150.00), 4th TV (150.00)	\$700.00
	es and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, collections, memorabilia, collectibles	coin, or baseball card collections;
	, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; can al instruments	oes and kayaks; carpentry tools;
	Camera (50.00)	\$50.00
10. Firearms  Examples: Pistol  No  Yes. Describe.	s, rifles, shotguns, ammunition, and related equipment	
	357 Pistol (500.00)	\$500.00
11. Clothes  Examples: Every  No  Yes. Describe.	rday clothes, furs, leather coats, designer wear, shoes, accessories	
	Clothing (600.00)	\$600.00
■ No □ Yes. Describe.  13. Non-farm animal	is , cats, birds, horses	ms, gold, silver

Official Form 106A/B Schedule A/B: Property page 3

Debtor 2

Valerie M. Lee

Case 17-12138-SDM Doc 6 Filed 06/23/17 Entered 06/23/17 13:47:00 Desc Main Page 6 of 47 Document Debtor 1 Dewey Anthony Lee Debtor 2 Valerie M. Lee Case number (if known) 14. Any other personal and household items you did not already list, including any health aids you did not list □ No Yes. Give specific information..... \$10,000.00 Storage Building (2400sq ft) - Came with the house 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$16,325.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. No Institution name: ☐ Yes..... 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: 401(k) Retirement Plan Unknown 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

No Institution name or individual: ☐ Yes. .....

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

■ No

Page 7 of 47 Document Dewey Anthony Lee Debtor 1 17-12138 Debtor 2 Valerie M. Lee Case number (if known) Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you □ No Yes. Give specific information about them, including whether you already filed the returns and the tax years...... Federal Income Tax Refund - [Not to Exceed \$5000.00 Per Year, Per Debtor] Unknown Federal State Income Tax Refund - [Not to Exceed \$5000.00 Per Year, Per Debtor] Unknown State Earned Income Tax Credit - [Not to Exceed \$5000.00 Per Year, Per Debtor] Unknown Federal 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information...... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value:

Official Form 106A/B Schedule A/B: Property page 5

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Desc Main

Case 17-12138-SDM Doc 6 Filed 06/23/17 Entered 06/23/17 13:47:00 Page 8 of 47 Document Debtor 1 Dewey Anthony Lee Case number (if known) 17-12138 Debtor 2 Valerie M. Lee 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$0.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

■ No

☐ Yes. Give specific information.......

54. Add the dollar value of all of your entries from Part 7. Write that number here ......

\$0.00

Official Form 106A/B Schedule A/B: Property page 6

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Dewey Anthony Lee Debtor 1 Case number (if known) 17-12138 Debtor 2 Valerie M. Lee Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 ..... \$125,000.00 Part 2: Total vehicles, line 5 56. \$52,357.50 Part 3: Total personal and household items, line 15 \$16,325.00 57. Part 4: Total financial assets, line 36 58. \$0.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total \$68,682.50 \$68,682.50 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$193,682.50

Official Form 106A/B Schedule A/B: Property page 7

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		I A A A HI III	$\frac{1}{1}$		
Fill in this info	rmation to identify your	case:			
Debtor 1	Dewey Anthony I	Lee			
	First Name	Middle Name	Last Name		
Debtor 2	Valerie M. Lee				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	NORTHERN MISSISSII	PPI DISTRICT		
Case number	17-12138				
(if known)				[	☐ Check if this is an amended filing

### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption	
Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
\$125,000.00		\$75,000.00	Miss. Code Ann. § 85-3-21	
		100% of fair market value, up to any applicable statutory limit		
\$28,507.50		\$1,184.50	Miss. Code Ann. § 85-3-1(a)	
		100% of fair market value, up to any applicable statutory limit		
\$11,677.50		\$11,677.50	Miss. Code Ann. § 85-3-1(a)	
		100% of fair market value, up to any applicable statutory limit		
\$12,172.50		\$813.00	Miss. Code Ann. § 85-3-1(a)	
		100% of fair market value, up to any applicable statutory limit		
	\$125,000.00 \$125,000.00 \$125,000.00	\$125,000.00  \$28,507.50  \$11,677.50  \$12,172.50	Check only one box for each exemption.  \$125,000.00  \$100% of fair market value, up to any applicable statutory limit  \$11,677.50  \$11,677.50  \$12,172.50  \$100% of fair market value, up to any applicable statutory limit	

### Case 17-12138-SDM Doc 6 Filed 06/23/17 Entered 06/23/17 13:47:00 Desc Main Document Page 11 of 47

Dewey Anthony Lee Debtor 1 17-12138 Valerie M. Lee Debtor 2 Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Living Room Furniture (600.00), Miss. Code Ann. § 85-3-1(a) \$4,475.00 \$4,475.00 Bedroom Furniture (1200.00), Dining Room Furniture (300.00), Refrigerator 100% of fair market value, up to (300.00), Stove (150.00), any applicable statutory limit Washer/Dryer (500.00), Microwave (25.00), Riding Mower (500.00), Fireplace (250.00), Outdoor Furniture (500.00)Personal Line from Schedule A/B: 6.1 Miss. Code Ann. § 85-3-1(a) TV (250.00) \$700.00 \$700.00 Personal Items Value<200.00 100% of fair market value, up to Exempt: any applicable statutory limit 2nd TV (150.00), 3rd TV (150.00), 4th TV (150.00) Line from Schedule A/B: 7.1 Camera (50.00) Miss. Code Ann. § 85-3-1(a) \$50.00 \$50.00 Line from Schedule A/B: 9.1 П 100% of fair market value, up to any applicable statutory limit 357 Pistol (500.00) Miss. Code Ann. § 85-3-1(a) \$500.00 \$500.00 Line from Schedule A/B: 10.1 100% of fair market value, up to any applicable statutory limit Clothing (600.00) Miss. Code Ann. § 85-3-1(a) \$600.00 \$600.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit 401(k): Retirement Plan Miss. Code Ann. § 85-3-1(e) Unknown Unknown Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit Federal: Federal Income Tax Refund -Miss. Code Ann. § 85-3-1(j) Unknown Unknown [Not to Exceed \$5000.00 Per Year, Per Debtor1 100% of fair market value, up to Line from Schedule A/B: 28.1 any applicable statutory limit State: State Income Tax Refund -Miss. Code Ann. § 85-3-1(k) Unknown Unknown [Not to Exceed \$5000.00 Per Year, Per Debtor] 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: 28.2 Federal: Earned Income Tax Credit -Miss. Code Ann. § 85-3-1(i) Unknown Unknown [Not to Exceed \$5000.00 Per Year, Per Debtor] 100% of fair market value, up to Line from Schedule A/B: 28.3 any applicable statutory limit

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Debtor 1 Debtor 2 Dewy Anthony Lee Valerie M. Lee Case number (if known)

3. Are you claiming a homestead exemption of more than \$160,375?
(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Yes

Case 17-12138-SDM Doc 6 Filed 06/23/17 Entered 06/23/17 13:47:00 Desc Main

	Documen	t Page 13	3 OT 4 /		
Fill in this information to identify	your case:				
Debtor 1	ony Lee	Last Name			
Debtor 2 Valerie M. Le					
(Spouse if, filing) First Name	Middle Name	Last Name			
United States Bankruptcy Court for	the: NORTHERN MISSISSIPP	1 DISTRICT			
Case number (if known) 17-12138					if this is an
				amend	led filing
Official Form 106D					
Schedule D: Credito	ors Who Have Clain	ns Secured	d by Propert	у	12/15
Be as complete and accurate as possi is needed, copy the Additional Page, fi number (if known).					
1. Do any creditors have claims secure	ed by your property?				
☐ No. Check this box and subr	mit this form to the court with your o	other schedules. Yo	ou have nothing else t	o report on this form.	
Yes. Fill in all of the informat	ion below.				
Part 1: List All Secured Claims	<b>3</b>				
2. List all secured claims. If a creditor for each claim. If more than one credito much as possible, list the claims in alpha	has more than one secured claim, list the	editors in Part 2. As	Column A  Amount of claim  Do not deduct the value of collateral.	Column B  Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 Badcock Furniture	Describe the property that sec		\$1,833.00	\$850.00	\$983.00
Creditor's Name	Fireplace (250.00), Outd Furniture (500.00)	oor			
416 Highway 12 W Starkville, MS 39759	As of the date you file, the claim apply.  Contingent	m is: Check all that			
Number, Street, City, State & Zip Code	■ Unliquidated				
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that approximation is a second content.	pply.			
☐ Debtor 1 only ☐ Debtor 2 only	☐ An agreement you made (succear loan)	ch as mortgage or sec	cured		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lier	n, mechanic's lien)			
☐ At least one of the debtors and anoth	ner				
☐ Check if this claim relates to a community debt	Other (including a right to offs	Purchase I	Money Security		
Date debt was incurred 3/2016	Last 4 digits of account	number			
2.2 Cornerstone Acceptance	Describe the property that sec	ures the claim:	\$27,323.00	\$28,507.50	\$0.00
Creditor's Name	2013 Toyota 4Runner 58 VIN#: JTEZU5JR5D5061				
3741 South Nova Road Port Orange, FL 32129	As of the date you file, the claim apply.  Contingent	m is: Check all that			
Number, Street, City, State & Zip Code	Unliquidated				
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that approximately	pply.			
☐ Debtor 1 only ☐ Debtor 2 only	☐ An agreement you made (succear loan)		cured		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lier	n, mechanic's lien)			
☐ At least one of the debtors and anoth					
☐ Check if this claim relates to a community debt	Other (including a right to offs	set) Title			
Date debt was incurred 1/2017	Last 4 digits of account	number			

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Debtor 1 Dewey Anthony Lee		Case number (if know)	17-12138	
First Name Middle N  Debtor 2 Valerie M. Lee	ame Last Name			
First Name Middle N	ame Last Name			
2.3 Credit Acceptance	Describe the property that secures the claim:	\$14,329.00	\$11,677.50	\$2,651.50
Creditor's Name	2014 Honda Civic 75000 miles			
P.O. Box 513	As of the date you file, the claim is: Check all that apply.			
Southfield, MI 48037	Contingent			
Number, Street, City, State & Zip Code	■ Unliquidated			
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
☐ Debtor 1 only	☐ An agreement you made (such as mortgage or	secured		
Debtor 2 only	car loan)			
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)	)		
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
·	Lord A. Politica of Control of Control			
Date debt was incurred 11/2016	Last 4 digits of account number			
2.4 OCWEN	Describe the property that secures the claim:	\$103,477.00	\$125,000.00	\$0.00
Creditor's Name	1025 Young Crossing Road		Ψ120,000.00	Ψοίου
	Louisville, MS 39339 Winston			
	County 5 Bedrooms, 3 Baths, Brick, 2 Acres			
P.O. Box 6440	As of the date you file, the claim is: Check all that			
Carol Stream, IL 60197-6440	apply. □ Contingent			
Number, Street, City, State & Zip Code	■ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or car loan)	secured		
Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
■ Debtor 1 and Debtor 2 only  □ At least one of the debtors and another	☐ Judgment lien from a lawsuit	)		
☐ Check if this claim relates to a	Other (including a right to offset)  Mortgag	re		
community debt				
Date debt was incurred	Last 4 digits of account number			
S C C C C C C C C C C C C C C C C C C C	Describe the manner to the terror the electric	¢4 cae ae	\$2,000,00	<b>\$0.00</b>
2.5 <b>S&amp;K Door Specialty Co.</b> Creditor's Name	Describe the property that secures the claim:  Garage Doors	<b>\$1,635.05</b>	\$2,000.00	\$0.00
	Gurage 20013			
	As of the date you file, the claim is: Check all that			
P.O. Box 1414 Starkville, MS 39760	apply.			
	Contingent			
Number, Street, City, State & Zip Code	<ul><li>■ Unliquidated</li><li>□ Disputed</li></ul>			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or	secured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)	)		
☐ At least one of the debtors and another☐ Check if this claim relates to a	☐ Judgment lien from a lawsuit ☐ Other (including a right to offset) ☐ Purchas	e Money Security		
community debt	— Other (including a right to offset)			
Date debt was incurred 2016	Last 4 digits of account number			
		<del></del>		

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Debtor 1	Dewey Anthony Lee			Case number (if know)	17-12138	
Debtor 2	First Name Middle I  Valerie M. Lee	Name Last Name				
	First Name Middle I	Name Last Name	_			
2.6 <b>Sa</b> n	ntander Consumer	Describe the property that secures	the claim:	\$18,351.00	\$12,172.50	\$6,178.50
Credit	D. Box 660633 Jas, TX 75266-0633	2014 Toyota Camry 85000 in VIN#: 4T1BF1FK2EU307400 Son Drives As of the date you file, the claim is: apply.  ☐ Contingent	niles )		,	
Numb	per, Street, City, State & Zip Code	■ Unliquidated □ Disputed				
Who owes	s the debt? Check one.	Nature of lien. Check all that apply.				
Debtor	•	☐ An agreement you made (such as car loan)	mortgage or	secured		
Debtor	1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
☐ At least	one of the debtors and another	☐ Judgment lien from a lawsuit				
	if this claim relates to a unity debt	Other (including a right to offset)	Title			
Date debt	was incurred <u>7/2014</u>	Last 4 digits of account num	nber			
2.7 <b>Spi</b>	ller Furniture	Describe the property that secures	the claim:	\$215.00	\$300.00	\$0.00
Credit	tor's Name	Bedroom Set (300.00)				
Tus	D. Box 20824 scaloosa, AL 02-0824	As of the date you file, the claim is: apply.  Contingent	: Check all that			
Numb	er, Street, City, State & Zip Code	■ Unliquidated □ Disputed				
_	s the debt? Check one.	Nature of lien. Check all that apply.				
☐ Debtor	•	☐ An agreement you made (such as car loan)	mortgage or s	secured		
Debtor	1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
_	one of the debtors and another if this claim relates to a	Judgment lien from a lawsuit	Durchas	e Money Security		
	unity debt	Other (including a right to offset)	Fuicilas	e Money Security		
Date debt	was incurred <u>9/2015</u>	Last 4 digits of account num	nber			
				0407.400	05	
		Column A on this page. Write that nun I the dollar value totals from all pages		\$167,163		
	at number here:			\$167,163	.05	
Part 2:	List Others to Be Notified f	or a Debt That You Already Listed	t			
trying to c	ollect from you for a debt you	be notified about your bankruptcy for owe to someone else, list the creditor at you listed in Part 1, list the addition his page.	in Part 1, and	d then list the collection age	ncy here. Similarly, if yo	u have more
Cre P.C	ne, Number, Street, City, State & edit Acceptance D. Box 513 uthfield, MI 48037	Zip Code		which line in Part 1 did you enter		

Case	: 17-12138-SDM D0C			:ntered :16 of 4	06/23/17 13: 17	47:00 Des	sc Main	
Fill in this infor	mation to identify your case:							
Debtor 1	Dewey Anthony Lee							
		ddle Name La	ast Nam	9				
Debtor 2 (Spouse if, filing)	Valerie M. Lee First Name Mic	ddle Name La	ast Nam	e				
United States Ba	ankruptcy Court for the: NORTH	IERN MISSISSIPPI DISTRI	ICT					
Case number	47 40400							
(if known)	17-12138					☐ Check	c if this is a	n
							ded filing	
Official Forr Schedule E	m 106E/F E <b>/F: Creditors Who H</b> a	ve Unsecured Cl	aim	s			12/1	5
any executory con Schedule G: Execu Schedule D: Credit left. Attach the Con name and case nu	, ,	I result in a claim. Also list en es (Official Form 106G). Do no operty. If more space is need ave no information to report i	xecuto ot inclu led, co	ory contract ude any cre opy the Part	s on Schedule A/B: F ditors with partially s you need, fill it out, i	Property (Official For ecured claims that number the entries	rm 106A/B) are listed in in the boxes	and on n s on the
	All of Your PRIORITY Unsecured							
_	ors have priority unsecured claims a	gainst you?						
□ No. Go to F	Part 2.							
Yes.								
identify what ty possible, list th	Ir priority unsecured claims. If a credi /pe of claim it is. If a claim has both pric ne claims in alphabetical order accordin than one creditor holds a particular cla	rity and nonpriority amounts, lis g to the creditor's name. If you h	st that o	claim here a	nd show both priority a	nd nonpriority amou	nts. As much	n as
(For an explan	nation of each type of claim, see the inst	ructions for this form in the insti	ruction	booklet.)	Total claim	Priority amount	Nonpriori amount	ity
	al Revenue Service	Last 4 digits of account nu	ımber		\$3,500.00	\$3,500.00		\$0.00
P.O. Bo	ox 7346	When was the debt incurre	ed?	2015				
Philade	elphia, PA 19114					-		
	Street City State Zlp Code  ed the debt? Check one.	As of the date you file, the	claim	is: Check a	ill that apply			
Debtor 1		☐ Contingent						
Debtor 2	•	Unliquidated						
_	•	☐ Disputed						
	and Debtor 2 only	Type of PRIORITY unsecu	red cla	ıim:				
☐ At least o	ne of the debtors and another	☐ Domestic support obligat	tions					
☐ Check if	this claim is for a community debt	Taxes and certain other	debts y	ou owe the	government			
	subject to offset?	☐ Claims for death or person	onal inj	ury while yo	u were intoxicated			
■ No		Other. Specify					_	
☐ Yes		Tax D	ebt					
Part 2: List A	All of Your NONPRIORITY Unsec	ured Claims						
	ors have nonpriority unsecured clair							
	ave nothing to report in this part. Submit		other	schedules.				
Yes.								
	ir nonpriority unsecured claims in the im, list the creditor separately for each of							

**Total claim** 

than one creditor holds a particular claim, list the other creditors in Part 3.lf you have more than three nonpriority unsecured claims fill out the Continuation Page of

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Debto	r 2 Valerie M. Lee		Case number (if know) 17-1	12138			
4.1	Alliance Collection Serv.	Last 4 digits of account number	Unknown	Unknown			
	Nonpriority Creditor's Name 600 W. Main St. Suite A	When was the debt incurred?	Unknown				
	Tupelo, MS 38802  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	☐ Debtor 1 only	☐ Contingent					
	Debtor 2 only	Unliquidated					
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	bject to offset? □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	■ Other. Specify Collections	1				
4.2	Altair OH XIII, LLC	Last 4 digits of account number	Unknown	Unknown			
	Nonpriority Creditor's Name c/o Weinstein, Pinson and Riley, PS 2001 Western Avenue, Suite 400 Seattle. WA 98121	When was the debt incurred?					
	Number Street City State Zlp Code Who incurred the debt? Check one.	ate Zlp Code As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	■ Unliquidated □ Disputed					
	■ Debtor 1 and Debtor 2 only						
	At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you	did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify Collections	:				
4.3	Atlas Acquisitions, LLC. Nonpriority Creditor's Name	Last 4 digits of account number	Unknown	Unknown			
	294 Union Street Hackensack, NJ 07601	When was the debt incurred?	Unknown				
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	Unliquidated					
	■ Debtor 1 and Debtor 2 only	Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you	did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify Collections	<b>:</b>				

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Debto	or 2 Valerie M. Lee	Case number (if know) 17-12138			
4.4	Baptist Memorial Hospital	Last 4 digits of account number	Unknown		
	Nonpriority Creditor's Name  P.O. Box 6200	When was the debt incurred?			
	Columbus, MS 39705  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	По и			
	☐ Debtor 1 only	Contingent			
	Debtor 2 only	Unliquidated			
	■ Debtor 1 and Debtor 2 only	Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharing plans, and other similar debts			
	■ No □ Yes	Medical services rendered to petitioner and/or family member			
4.5	Capital One	Last 4 digits of account number	\$485.00		
	Nonpriority Creditor's Name P.O. Box 85149 Richmond, VA 23295-0001	When was the debt incurred?			
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	□ Debtor 1 only □ Contingent				
	☐ Debtor 2 only ☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify Purchases on Credit Card			
4.6	Cerastes, LLC Nonpriority Creditor's Name	Last 4 digits of account number	Unknown		
	2001 Western Avenue Suite 43	When was the debt incurred?			
	Seattle, WA 98121  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	_			
	Debtor 2 only				
		■ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:			
	At least one of the debtors and another	Student loans			
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	No	□ Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes ☐ Other. Specify <b>Collections</b>				

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	r 1 Dewey Anthony Lee r 2 <b>Valerie M. Lee</b>	Case number (if know) 17-12138				
4.7	Check Advance	Last 4 digits of account number	\$600.00			
	Nonpriority Creditor's Name 952 W Main Street Louisville, MS 39339	When was the debt incurred?				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	По и				
	Debtor 1 only	Contingent				
	Debtor 2 only	■ Unliquidated				
	■ Debtor 1 and Debtor 2 only	Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  ☐ Student loans				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not				
	No	report as priority claims  Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Signature Loan				
4.8	Enhanced Recovery Corporation  Nonpriority Creditor's Name	Last 4 digits of account number Unknown	Unknown			
	8014 Bayberry Rd Jacksonville, FL 32256	When was the debt incurred? Unknown				
	Number Street City State Zlp Code					
	Who incurred the debt? Check one.					
	Debtor 1 only	Contingent				
	Debtor 2 only	Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	■ Other. Specify Collections				
	Li res	Other. Specify				
4.9	First Heritage Credit Nonpriority Creditor's Name	Last 4 digits of account number	\$715.00			
	110 North WalMart Drive #C Louisville, MS 39339	When was the debt incurred?				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	_				
	☐ Debtor 1 only	☐ Contingent				
	Debtor 2 only	Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	□ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes ☐ Other. Specify Check in Mail					
	<b>—</b> 103	Outlet. Specify				

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Deb	tor 2 Valerie M. Lee	Case number (if know) 17	7-12138			
4.1	Franklin Collection Service	Last 4 digits of account number Unknown	Unknown			
0	Nonpriority Creditor's Name P.O. Box 3910	When was the debt incurred? Unknown				
	Tupelo, MS 38803  Number Street City State Zlp Code	As of the date you file the claim is: Check all that apply				
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	■ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that y report as priority claims	ou did not			
	No	$\square$ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Collections				
4.1	GM Financial	Last 4 digits of account number	\$17,427.00			
'	Nonpriority Creditor's Name					
	P.O. Box 183834	When was the debt incurred?				
	Arlington, TX 76096  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	, and a line year me, and claim to consolican man apply				
	□ Debtor 1 only □ Contingent					
	Debtor 2 only	Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	$\hfill \square$ Obligations arising out of a separation agreement or divorce that y report as priority claims	ou did not			
	No	$\square$ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	■ Other. Specify Balance Owed on Repossessed 201 Tahoe	0 Chevy			
4.1	Hope Credit Union	Last 4 digits of account number	\$290.00			
	Nonpriority Creditor's Name					
	PO Box 22886 Jackson, MS 39225	When was the debt incurred?				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	☐ Debtor 1 only	☐ Contingent				
	Debtor 2 only	Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	<ul> <li>Obligations arising out of a separation agreement or divorce that y report as priority claims</li> </ul>	ou did not			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
		_ Charged off account - listed on cred	lit			
	Yes	Other. Specify report				

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Debtor Debtor	1 Dewey Anthony Lee 2 Valerie M. Lee		Case number (if know) 17-12138	
4.1	Jefferson Capital Systems, LLC	Last 4 digits of account number	Unknown	Unknown
	Nonpriority Creditor's Name  P.O. Box 23051  Spirit Claud, MN 55202	When was the debt incurred?	Unknown	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify <b>Collections</b>	3	
4.1	Methodist Rehab	Last 4 digits of account number		Unknown
	Nonpriority Creditor's Name 1350 East Woodrow Wilson Avenue Jackson, MS 39216	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	·	rvices rendered to petitioner	
4.1 5	Midland Funding	Last 4 digits of account number	Unknown	Unknown
	Nonpriority Creditor's Name  MCM Dept. 12421  P.O. Box 603  Ooks PA 10456	When was the debt incurred?	Unknown	
	Oaks, PA 19456  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	■ Unliquidated		
	■ Debtor 1 and Debtor 2 only □ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt	Obligations arising out of a sepa		
	Is the claim subject to offset?	report as priority claims	and an and ather to the state	
	■ No	☐ Debts to pension or profit-sharin		
	☐ Yes	■ Other, Specify Collections	5	

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	or 2 Valerie M. Lee		Case number (if know)	17-12138				
4.1 6	MSCB	Last 4 digits of account number	Unknown		Unknown			
0	Nonpriority Creditor's Name P.O. Box 1567	When was the debt incurred?	Unknown					
	Paris, TN 38242-1567  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply					
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	■ Unliquidated						
	■ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce	that you did not				
	■ No	■ No □ Debts to pension or profit-sharing plans, and other similar debts						
	Yes	■ Other. Specify Collections	•					
4.1 7	Navient	Last 4 digits of account number			\$13,397.00			
	Nonpriority Creditor's Name P.O. Box 9533 Wilkes Barre, PA 18773	When was the debt incurred?						
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	☐ Debtor 1 only							
	☐ Debtor 2 only ☐ Unliquidated							
	■ Debtor 1 and Debtor 2 only	■ Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims						
	No	Debts to pension or profit-sharing						
	Yes	Other. Specify						
			an - TO BE DEFFERI TCY COMPLETION	ED UNTIL				
4.1 8	Patient Account Services	Last 4 digits of account number	Unknown		Unknown			
	Nonpriority Creditor's Name 1300 Riverplace Blvd Suite 300	When was the debt incurred?	Unknown					
	Jacksonville, FL 32207  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim						
	☐ Debtor 1 only	☐ Contingent						
	Debtor 2 only	Unliquidated						
	■ Debtor 1 and Debtor 2 only	or 2 only						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separate as priority aloins.	that you did not					
	■ No	report as priority claims  Debts to pension or profit-sharin	a plans, and other similar do	ahte				
		·	•					
	☐ Yes	■ Other. Specify Collections	•					

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	or 2 Valerie M. Lee		Case number (if know)	17-12138	
4.1 9	Portfolio Recovery Associates, LLC	Last 4 digits of account number	Unknown		Unknown
<u> </u>	Nonpriority Creditor's Name Post Office Box 12914	When was the debt incurred?	Unknown		
	Norfolk, VA 23541-2914  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	■ Unliquidated			
	■ Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar de	bts	
	Yes	■ Other. Specify Collections	:		
4.2 0	Quantum3 Group LLC	Last 4 digits of account number	Unknown		Unknown
o .	Nonpriority Creditor's Name P.O. Box 788	When was the debt incurred?	Unknown		
	Kirkland, WA 98083  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	■ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims			
	■ No	Debts to pension or profit-sharin	g plans, and other similar de	bts	
	Yes	Other. Specify Collections	:		
4.2	Resurgent Capital Services	Last 4 digits of account number	Unknown		Unknown
ı	Nonpriority Creditor's Name P.O. Box 129	When was the debt incurred?	Unknown		
	Thorofare, NJ 08086-0129  Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply		
	Who incurred the debt? Check one.	,	or officer an inat apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	that you did not		
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharin		bts	
	Yes	Other. Specify Collections	•		

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Debtor Debtor	Dewey Anthony Lee Valerie M. Lee	Case number (if know) 17-12138	3
4.2	Revenue Recovery Corporation	Last 4 digits of account number Unknown	Unknown
	Nonpriority Creditor's Name 6207 Summer Avenue P.O. Box 341308	When was the debt incurred? Unknown	
	Memphis, TN 38184-1308  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	Unliquidated	
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did no report as priority claims	pt
	No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collections	_
4.2	Speedy Cash Nonpriority Creditor's Name	Last 4 digits of account number	\$1,004.67
	3611 North Ridge Road Suite 101 Wichita, KS 67205	When was the debt incurred?	_
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	<ul> <li>☐ Student loans</li> <li>☐ Obligations arising out of a separation agreement or divorce that you did no report as priority claims</li> </ul>	pt
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Signature Loan	_
4.2	ST DOMINIC HOSPITAL  Nonpriority Creditor's Name	Last 4 digits of account number	\$800.00
	969 LAKELAND DRIVE Jackson, MS 39216	When was the debt incurred?	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did no report as priority claims	ot
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Medical services rendered to petitioner  Other. Specify and/or family member	

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Debtor Debtor	1 Dewey Anthony Lee 2 Valerie M. Lee	Case number (if know) 17-12138	
4.2 5	Student Assistance Corporation	Last 4 digits of account number	\$6,000.00
	Nonpriority Creditor's Name P.O. Box 9570 Wilkes Barre, PA 18773-9570	When was the debt incurred?	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
		Student Loan - TO BE DEFFERED UNTIL BANKRUPTCY COMPLETION	
4.2	Tupelo Service Finance	Last 4 digits of account number Unknown	Unknown
	Nonpriority Creditor's Name  1040 Cliff Gookin Blvd, Suite 1  P.O. Box 1791  Table 140 20000	When was the debt incurred?  Unknown	
-	Tupelo, MS 38802 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Collections	
4.2	US Department of Education	Last 4 digits of account number	\$14,530.00
7	Nonpriority Creditor's Name		Ψ. 1,000.00
	P.O. Box 5609 Greenville, TX 75403	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only	■ Unliquidated	
	Debtor 2 only		
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	■ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	☐ Other. Specify	
		Student Loan - TO BE DEFFERED UNTIL BANKRUPTCY COMPLETION	

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Debtor 1 Dewey Anthony Lee 17-12138 Debtor 2 Valerie M. Lee Case number (if know) 4.2 Weinstein, Pinson, & Riley Unknown Unknown Last 4 digits of account number 8 Nonpriority Creditor's Name 2001 Western Avenue When was the debt incurred? Unknown Suite 400 Seattle, WA 98121 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only □ Contingent Debtor 2 only Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Collections** Other, Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Smith, Rouchon & Associates Line 4.24 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 1456 Ellis Ave ■ Part 2: Creditors with Nonpriority Unsecured Claims Jackson, MS 39204 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? U.S. Attorney Line 2.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims 900 Jefferson Ave ☐ Part 2: Creditors with Nonpriority Unsecured Claims Oxford, MS 38655 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? U.S. Attorney Line 4.25 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 900 Jefferson Ave Part 2: Creditors with Nonpriority Unsecured Claims Oxford. MS 38655 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address U.S. Attorney Line 4.17 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 900 Jefferson Ave Part 2: Creditors with Nonpriority Unsecured Claims Oxford, MS 38655 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? U.S. Attorney Line 4.27 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 900 Jefferson Ave Part 2: Creditors with Nonpriority Unsecured Claims Oxford, MS 38655 Last 4 digits of account number Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total Claim Domestic support obligations** 6a 0.00 Total claims from Part 1 Taxes and certain other debts you owe the government 6b. 3,500.00 Claims for death or personal injury while you were intoxicated 6c. 0.00 Other. Add all other priority unsecured claims. Write that amount here. 0.00

Official Form 106 E/F

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Debtor 1 Dewey Anthony Lee 17-12138 Debtor 2 Valerie M. Lee Case number (if know) Total Priority. Add lines 6a through 6d. 6e. 3,500.00 **Total Claim** Student loans 6f. 33,927.00 Total claims from Part 2 Obligations arising out of a separation agreement or divorce that 0.00 you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts 6g. 6h. 0.00 6i. Other. Add all other nonpriority unsecured claims. Write that amount 6i. 21,321.67 Total Nonpriority. Add lines 6f through 6i. 6j. 55,248.67

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		17/1/11111	1 ////. / () () 4	I
Fill in this infor	mation to identify your	case:		
Debtor 1	Dewey Anthony I	Lee		
	First Name	Middle Name	Last Name	
Debtor 2	Valerie M. Lee			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN MISSISSI	PPI DISTRICT	
Case number (if known)	17-12138			☐ Check if this is an amended filing

### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have the	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	<del>_</del>
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.3	O.t.y		- Cidio		
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>

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		Docume	nt Page 29 of	f 47		
Fill in thi	s information to identify your	case:				
Debtor 1	Dewey Anthony	Lee				
Dahtar 0	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, fi	Iing) Valerie M. Lee First Name	Middle Name	Last Name			
United St	ates Bankruptcy Court for the:	NORTHERN MISSISSIF	PPI DISTRICT			
Case nun	nber <i>17-12138</i>					
(if known)						Check if this is an amended filing
Officia	al Form 106H					
	dule H: Your Cod	obtore				40/45
Scrie	dule n. Toul Cou	enroi 2				12/15
people ar fill it out, your nam	s are people or entities who a e filing together, both are equ and number the entries in the e and case number (if known) you have any codebtors? (If	ally responsible for supp boxes on the left. Attach Answer every question.	lying correct information the Additional Page to	on. If more space is not this page. On the top	eeded, co <sub>l</sub>	py the Additional Page,
1. 50	you have any codebiols: (ii	you are ming a joint case, t	do not list citrici spouse t	as a codebior.		
■ No						
□ Ye	<b>9</b> \$					
	thin the last 8 years, have you na, California, Idaho, Louisiana				/ states and	d territories include
■ No	o. Go to line 3.					
□Y€	es. Did your spouse, former spo	use, or legal equivalent live	with you at the time?			
in lin Form	olumn 1, list all of your codebt e 2 again as a codebtor only i n 106D), Schedule E/F (Officia Column 2.	f that person is a guarant	tor or cosigner. Make s	ure you have listed th	e creditor	on Schedule D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and Z	P Code		Column 2: The cre Check all schedule		hom you owe the debt y:
3.1				☐ Schedule D. line	Э	
	Name			☐ Schedule E/F, li		
				☐ Schedule G, line	э	
	Number Street	Otata	71D O- 4-	-		
	City	State	ZIP Code			
3.2				☐ Schedule D, line	Э	
	Name			☐ Schedule E/F, li	ine	
				☐ Schedule G, line	e	
	Number Street			_		

State

City

ZIP Code

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Fill	in this information to	identify your ca	se:								
Del	otor 1	Dewey Antho	ony Lee			_					
	otor 2 ouse, if filing)	Valerie M. Le	ee			_					
Uni	ted States Bankrupt	cy Court for the:	NORTHERN MISSISS	SIPPI DISTRICT		_					
	se number 17-	12138					Check if this is.  An amende  A supplement	ed filing ent showir			
$\bigcirc$	fficial Form	1061							ollowing date:		
	chedule I: \		ama.				MM / DD/ Y	YYY		12/15	
sup spo atta	plying correct infor use. If you are sepa ch a separate shee	mation. If you a arated and you t to this form. C	ible. If two married peo are married and not filir r spouse is not filing wi On the top of any addition	ng jointly, and your th you, do not inclu	spouse i	s liv natio	ing with you, incl on about your spo	ude infor	mation about ore space is	your needed,	
1.	• • •			Debtor 1			Dobtor	) or non f			
	information.  If you have more than one job, attach a separate page with information about additional employers.			☐ Employed		Debtor 2 or non-filing spouse  ■ Employed					
			Employment status	■ Not employed				mployed			
			Occupation	Disabled			Nurse	1 -7			
	Include part-time, s self-employed wor		Employer's name				Winston Medical Center				
	Occupation may in or homemaker, if it		Employer's address					P.O. Box 967 Louisville, MS 39339			
			How long employed th	nere?				2 Months	5		
<b>Esti</b> spou	mate monthly incouse unless you are s	eparated. spouse have mo	te you file this form. If y	J	•	Í	,	on on the l	ines below. If y	J	
2.			y, and commissions (be alculate what the monthly		2.	\$	0.00	\$	2,556.05		
3.	Estimate and list	monthly overti	me pay.		3.	+\$	0.00	+\$	0.00		
4.	Calculate gross li	ncome. Add lin	e 2 + line 3.		4.	\$	0.00	\$	2,556.05		

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Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. +\$  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies	Debto		Dewey Anthony Lee Valerie M. Lee	-	Case	e number ( <i>if known</i> )	17-12	138	
5. List all payroll deductions:  5a. Tax, Medicare, and Social Security deductions  5b. Mandatory contributions for retirement plans  5c. Voluntary Contributions for the form of the form fland for the form of the for		0		4				iling spouse	
5a. Tax, Medicare, and Social Security deductions   5a. \$ 0.00   \$ 0.00		Сор	y line 4 nere	4.	\$_	0.00	\$	2,556.05	
55.   Mandatory contributions for retirement plans   5c.   5.   0.00   \$   10.23	5.	List	all payroll deductions:						
5c.   Voluntary contributions for retirement plans   5c.   \$ 0.00   \$ 0.00     5d.   Required repayments of retirement fund loans   5d.   \$ 0.00   \$ 312.93     5f.   Domestic support obligations   5f.   \$ 0.00   \$ 0.00     5g.   Inion dues   5g.   \$ 0.00   \$ 0.00     5h.   Other deductions. Specify:   5h.   \$ 0.00   \$ 0.00     5h.   Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5p+5h.   6.   \$ 0.00   \$ 0.00     6c.   Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5p+5h.   6.   \$ 0.00   \$ 0.00     6c.   Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5p+5h.   6.   \$ 0.00   \$ 0.00     6c.   Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5p+5h.   6.   \$ 0.00   \$ 0.00     6c.   Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5p+5h.   6.   \$ 0.00   \$ 0.00     6c.   Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5p+5h.   6.   \$ 0.00   \$ 0.00     6c.   Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5p+5h.   6.   \$ 0.00   \$ 0.00     6c.   Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5p+5h.   6.   \$ 0.00   \$ 0.00     6c.   Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5p+5h.   6.   \$ 0.00   \$ 0.00     6c.   Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5p+5h.   6.   \$ 0.00   \$ 0.00     6c.   Add the payroll deductions. Add lines 6a+5b+5c+5d+5e+5f+5p+5h.   6.   \$ 0.00   \$ 0.00     6c.   Add all other income regularly receive   8c.   \$ 0.00   \$ 0.00     6c.   Social Security   8e.   \$ 0.00   \$ 0.00			·						
5d.   Required repayments of retirement fund loans   5d.   \$ 0.00   \$ 312.98     5e.   Insurance   5f.   \$ 0.00   \$ 312.98     5f.   Domestic support obligations   5f.   \$ 0.00   \$ 0.00     5g.   Union dues   5g.   \$ 0.00   \$ 0.00     5h.   Other deductions. Specify:   5h.   \$ 0.00   \$ 0.00     5h.   Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.   6.   \$ 0.00   \$ 600.37     7.   Calculate total monthly take-home pay. Subtract line 6 from line 4.   7.   \$ 0.00   \$ 1,955.68     8.   List all other income regularly received:   8a.   Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.   8a.   \$ 0.00   \$ 0.00     8b.   Interest and dividends   8b.   \$ 0.00   \$ 0.00     8c.   Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.   8d.   \$ 0.00   \$ 0.00     8e.   Social Security   8e.   \$ 0.00   \$ 0.00     8e.   Social Security   \$ 8e.   \$ 0.00   \$ 0.00     8e.   Social Security   \$ 8e.   \$ 0.00   \$ 0.00     8e.   Social Security   \$ 8e.   \$ 0.00   \$ 0.00     8e.   Social Security   \$ 8e.   \$ 0.00   \$ 0.00     8e.   Social Security   \$ 8e.   \$ 0.00   \$ 0.00     8e.   Social Security   \$ 8e.   \$ 0.00   \$ 0.00     8e.   Social Security   \$ 8e.   \$ 0.00   \$ 0.00     8e.   Social Security   \$ 8e.   \$ 0.00   \$ 0.00     8e.   Social Security   \$ 8e.   \$ 0.00   \$ 0.00     8e.   Social Security   \$ 8e.   \$ 0.00   \$ 0.00     8e.   Social Security   \$ 8e.   \$ 0.00   \$ 0.00     8e.   Social Security   \$ 8e.			·		· -		· -		
5e.   Insurance   5e.   \$ 0.00   \$ 312.98     5f.   Domestic support obligations   5f.   \$ 0.00   \$ 0.00     5h.   Other deductions. Specify:   5h.   \$ 0.00   \$ 0.00     5h.   Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.   6.   \$ 0.00   \$ 0.00     7r.   Calculate total monthly take-home pay. Subtract line 6 from line 4.   7r.   \$ 0.00   \$ 1,955.68     8l.   List all other income regularly received:   8a.   Net income from rental property and from operating a business, profession, or line income from rental property and from operating a business, profession, or line income from rental property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly and necessary business expenses and the total monthly and necessary business expenses and the total monthly and necessary business expenses in the total monthly and necessary business expenses and the total monthly and necessary business expenses in the total monthly and necessary business expenses and the total monthly income.   \$ 0.00							· —		
5f. Domestic support obligations 5g. Union dues 5g.					· -		· · —		
5g. Union dues 5h. Other deductions. Specify: 5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$0.00 \$0.00 5h.+ \$0.00 5h.							· —		
5h. Other deductions. Specify:  6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 0.00 \$ 600.37  7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 0.00 \$ 1,955.68  List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Altach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ 0.00  8d. Unemployment compensation 8d. \$ 0.00 \$ 0.00  8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: Disability 8g. Pension or retirement income 8g. \$ 0.00 \$ 0.00  8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,444.00 \$ 0.00  9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 2,444.00 \$ 0.00  10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. + \$ 1.			• • •		· -		· —		
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Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  12. Combined monthly in		Incluothe Do r	ide contributions from an unmarried partner, members of your household, your r friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a	depen					0.00
monthly i		Writ	e that amount on the Summary of Schedules and Statistical Summary of Certain						<i>4,</i> 399.68
No.  Yes. Explain:	13.	Do y ■		?					

Fill	in this informa	ation to identify yo	ur case:					
Deb		Dewey Antho				Chec	k if this is:	
Data	4 0						An amended filing	
	tor 2 ouse, if filing)	Valerie M. Le	e				A supplement shown as of the supplement of the supplement of the supplement shown as of the supplement shown as the supplement of the supp	ving postpetition chapter the following date:
Unit	ed States Bank	ruptcy Court for the:	NORTH	ERN MISSISSIPPI DISTR	ICT	-	MM / DD / YYYY	
Cas	e number 1	7-12138						
(If kı	nown)							
Of	fficial Fo	orm 106J						
Sc	chedule	J: Your I	Expen	ises				12/1
Be a	as complete ormation. If n nber (if know	and accurate as	possible. eded, atta y question	If two married people ar	e filing together, bo form. On the top of	oth are equa any additio	ally responsible fo nal pages, write y	or supplying correct your name and case
1.	Is this a joi		iioiu					
	☐ No. Go to							
		es Debtor 2 live i	n a separa	ate household?				
	■ N		t file Officia	al Form 106J-2, <i>Expen</i> ses	for Separate House	hold of Debi	or 2.	
2.	Do you hav	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Son			■ Yes □ No
					Son		13	■ Yes
								□ No
					Son		18	Yes
								□ No □ Yes
3.	expenses of	penses include f people other th d your depender	nan $_{\square}$	No Yes				103
Par		nate Your Ongoir						
exp		a date after the b		uptcy filing date unless y y is filed. If this is a supp				
the		h assistance and		government assistance it luded it on <i>Schedule I:</i> Y			Your expe	enses
4.		or home owners		ses for your residence. In r lot.	nclude first mortgage	4. \$		0.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a. \$		0.00
		erty, homeowner's				4b. \$		0.00
		e maintenance, re eowner's associat				4c. \$ 4d. \$		0.00 0.00

5. Additional mortgage payments for your residence, such as home equity loans

0.00

# Case 17-12138-SDM Doc 6 Filed 06/23/17 Entered 06/23/17 13:47:00 Desc Main Document Page 33 of 47

Debtor Debtor		Anthony Lee M. Lee	Case number (if knowr	17-12138
6. <b>U</b>	tilities:			
6	a. Electricity	r, heat, natural gas	6a. \$	250.00
6	b. Water, se	wer, garbage collection	6b. \$	75.00
60	c. Telephon	e, cell phone, Internet, satellite, and cable services	6c. \$	150.00
60	d. Other. Sp	ecify:	6d. \$	0.00
7. <b>F</b>		sekeeping supplies	7. \$	600.00
		children's education costs	8. \$	60.00
9. <b>C</b>	lothing, laund	dry, and dry cleaning	9. \$	100.00
10. <b>P</b>	ersonal care i	products and services	10. \$	75.00
		ental expenses	11. \$	54.00
		Include gas, maintenance, bus or train fare.	·	
	o not include o		12. \$	200.00
13. <b>E</b>	ntertainment,	clubs, recreation, newspapers, magazines, and books	13. \$	0.00
14. <b>C</b>	haritable con	tributions and religious donations	14. \$	200.00
15. <b>I</b> n	surance.			
D	o not include i	nsurance deducted from your pay or included in lines 4 or 2	0.	
	5a. Life insura		15a. \$	0.00
15	5b. Health ins	surance	15b. \$	0.00
15	5c. Vehicle in	nsurance	15c. \$	200.00
15	5d. Other insi	urance. Specify:	15d. \$	0.00
16. <b>T</b> a	axes. Do not in	nclude taxes deducted from your pay or included in lines 4 c	or 20.	
S	pecify: Car	Tag & Registration	16. \$	20.00
		lease payments:		
17	7a. Car paym	nents for Vehicle 1	17a. \$	0.00
17	7b. Car paym	nents for Vehicle 2	17b. \$	0.00
17	7c. Other. Sp	ecify:	17c. \$	0.00
17	7d. Other. Sp	ecify:	17d. \$	0.00
18. <b>Y</b>	our payments	s of alimony, maintenance, and support that you did not	report as	
		your pay on line 5, Schedule I, Your Income (Official Fo		0.00
19. <b>O</b>	ther payment	s you make to support others who do not live with you.	\$	0.00
	pecify:		19.	
		perty expenses not included in lines 4 or 5 of this form o		
		s on other property	20a. \$	0.00
	0b. Real esta		20b. \$	0.00
20	0c. Property,	homeowner's, or renter's insurance	20c. \$	0.00
20	0d. Maintena	nce, repair, and upkeep expenses	20d. \$	0.00
20	0e. Homeowr	ner's association or condominium dues	20e. \$	0.00
21. <b>O</b>	ther: Specify:		21. +\$	0.00
no <b>c</b>	alaulata vauv	monthly sympasses		
	-	monthly expenses	<b>•</b>	4 004 00
	2a. Add lines 4		\$	1,984.00
		22 (monthly expenses for Debtor 2), if any, from Official Form		
22	2c. Add line 22	2a and 22b. The result is your monthly expenses.	\$	1,984.00
23. <b>C</b>	alculate vour	monthly net income.		
		12 (your combined monthly income) from Schedule I.	23a. \$	4,399.68
		r monthly expenses from line 22c above.	23b\$	1,984.00
۷.	сс. Сору уби	. Monthly expenses from the 220 above.		1,304.00
2:	3c. Subtract v	your monthly expenses from your monthly income.		
_\		t is your monthly net income.	23c. \$	2,415.68
		an increase or decrease in your expenses within the ye		
		ou expect to finish paying for your car loan within the year or do you	expect your mortgage payment to in	ncrease or decrease because of a
		e terms of your mortgage?		
	No.			
	Yes.	Explain here:		

## Case 17-12138-SDM Doc 6 Filed 06/23/17 Entered 06/23/17 13:47:00 Desc Main Document Page 34 of 47

Fill in this infor				
Debtor 1	Dewey Anthony I	Lee		
	First Name	Middle Name	Last Name	
Debtor 2	Valerie M. Lee			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN MISSISSIF	PPI DISTRICT	
Case number	17-12138			
(if known)				☐ Check if this is an amended filing

#### Official Form 106Dec

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NC	OT an attorney to help you fill out bankruptcy forms?
■ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119)
Under penalty of perjury, I declare that I have reathat they are true and correct.  X /s/ Dewey Anthony Lee Dewey Anthony Lee Signature of Debtor 1  Date June 23, 2017	X /s/ Valerie M. Lee Valerie M. Lee Signature of Debtor 2 Date June 23, 2017

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Fill in	this info	rmation to identify you	r case:							
Debto		Dewey Anthony								
Dobto.		First Name	Middle Name	Last Name	<del></del>					
Debto		Valerie M. Lee	Middle Nome	Lost Nama						
(Spouse	-		Middle Name	Last Name						
United	States I	Bankruptcy Court for the:	NORTHERN MISSISSIPI	PI DISTRICT						
Case r	number	17-12138								
(if knowr	1)				_	Check if this is an amended filing				
Offic	cial F	orm 107								
Stat	emer	t of Financial	Affairs for Individ	duals Filing for I	Bankruptcy	4/16				
inform	ation. If		attach a separate sheet to		e equally responsible for su ny additional pages, write yo					
Part 1	Give	Details About Your Ma	rital Status and Where You	Lived Before						
1. W	hat is yo	our current marital statu	is?							
	l Marri l Not m	ed arried								
2. Dı	During the last 3 years, have you lived anywhere other than where you live now?									
	No Yes.	ist all of the places you l	ived in the last 3 years. Do no	ot include where you live no	w.					
D	ebtor 1	Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior A	ddress:	Dates Debtor 2 lived there				
			-		nity property state or territor	- 1				
	l <sub>No</sub>	•	, , ,	,	, ,	,				
		Make sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).						
Part 2	Ехр	ain the Sources of You	r Income							
Fil	ll in the t	otal amount of income yo	nployment or from operatin u received from all jobs and a have income that you receiv	all businesses, including pa		endar years?				
	l No									
	Yes.	Fill in the details.								
			Debtor 1		Debtor 2					
			Sources of income	Gross income	Sources of income	Gross income				
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)				
		1 of current year until led for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$0.00	■ Wages, commissions, bonuses, tips	\$17,806.29				
			☐ Operating a business		☐ Operating a business					

Official Form 107

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Debtor 1 Debtor 2	-	/ Anthor e M. Lee	•		Doddine			Case	number (if known)	17-12138	
					of income that apply.	(be	oss income fore deductions a clusions)	nd	Sources of inco		Gross income (before deductions and exclusions)
For last of (January			, 2016 )	☐ Wages bonuses,	s, commissions, tips		\$0.	00	■ Wages, common bonuses, tips	missions,	\$43,649.00
				☐ Opera	ting a business				☐ Operating a b	ousiness	
For the c (January				☐ Wages bonuses,	s, commissions, tips		\$16,107.	00	■ Wages, commonuses, tips	missions,	\$33,407.00
				☐ Opera	ting a business				☐ Operating a b	ousiness	
_	each sourd No Yes. Fill in		Ū		ach source separa	ately. D	o not include inco	me tha	,	∋ 4.	
				Debtor 1 Sources of Describe b	of income pelow.	eac (be	oss income from ch source fore deductions a clusions)		Debtor 2 Sources of inco Describe below.		Gross income (before deductions and exclusions)
From Jar			year until ruptcy:	Disabilit	y Income		\$9,768.	00			
				Children Benefits	's Disability		\$4,896.	00			
Part 3:	List Cer	tain Payr	nents You	Made Befo	ore You Filed for	Bankr	uptcy				
	No. <b>Ne</b> i	ither Deb	tor 1 nor D	ebtor 2 ha	imarily consume s primarily cons amily, or househo	umer d	lebts. Consumer	debts	are defined in 11	U.S.C. § 101	(8) as "incurred by ar
		Ū	days befo	re you filed	for bankruptcy, d	lid you	pay any creditor a	total	of \$6,425* or more	e?	
			Go to line 7								
		1	paid that cre not include	editor. Do n payments t	ot include payme o an attorney for t	nts for this bar	domestic support	obliga	tions, such as chi	ild support ar	ne total amount you and alimony. Also, do
					e primarily const for bankruptcy, d		lebts. pay any creditor a	total	of \$600 or more?		
			Go to line 7								
		i	nclude pay		omestic support o		al of \$600 or more ons, such as child				creditor. Do not nclude payments to a
Cred	ditor's Na	me and A	Address		Dates of payme	ent	Total amour		Amount you still owe	Was this p	ayment for
							•				

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	otor 1 otor 2	Dewey Anthony Lee Valerie M. Lee	Document 1	Cas	e number (if known)	17-12138					
	Inside of whi	n 1 year before you filed for bankruptoers include your relatives; any general particly you are an officer, director, person in iness you operate as a sole proprietor. 17 ny.	rtners; relatives of any gen- control, or owner of 20% or	eral partners; partner r more of their voting	erships of which you g securities; and an	ı are a genera y managing a	al partner; corporations gent, including one for				
		No									
		Yes. List all payments to an insider.									
	Insid	ler's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment				
	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.										
		No									
		Yes. List all payments to an insider ler's Name and Address	Dates of payment	Total amount	Amount you		this payment				
				paid	still owe	Include cred	itor's name				
Par	t 4:	Identify Legal Actions, Repossession	s, and Foreclosures								
	List al modifi	n 1 year before you filed for bankrupto Il such matters, including personal injury ications, and contract disputes.  No Yes. Fill in the details.					or custody				
	Case	number									
	Check	n 1 year before you filed for bankrupto k all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.	<i>i.</i>	rty repossessed, f	oreclosed, garnisl	hed, attached	I, seized, or levied?				
	Cred	litor Name and Address	Describe the Property		Date		Value of the property				
			Explain what happened								
	P.O.	Financial . Box 183834 ngton, TX 76096	■ Property was reposse □ Property was foreclos □ Property was garnishe □ Property was attached	ed. ed.	2016		Unknown				
	accol	n 90 days before you filed for bankrup unts or refuse to make a payment beca No Yes. Fill in the details.		uding a bank or fir	nancial institution,	set off any a	mounts from your				
	Cred	litor Name and Address	Describe the action the	creditor took	Date a taken	ection was	Amount				
	court	n 1 year before you filed for bankrupto -appointed receiver, a custodian, or an No Yes		rty in the possess	ion of an assignee	for the bene	fit of creditors, a				

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	otor 1 otor 2	Dewey Anthony Lee Valerie M. Lee			Case number (if known)	17-12138				
Pai	t 5:	List Certain Gifts and Contribution	ıs							
13.	■ N	n 2 years before you filed for bankr No Yes. Fill in the details for each gift.	uptcy, c	did you give any gifts with a total	value of more than \$60	)0 per person?	?			
	per p	with a total value of more than \$60 person		Describe the gifts	Date the g	s you gave gifts	Value			
	Perso	on to Whom You Gave the Gift and ress:								
14.	■ N	n 2 years before you filed for bankr No Yes. Fill in the details for each gift or c			ions with a total value	of more than	\$600 to any charity?			
	more Chari	or contributions to charities that to than \$600 or contributions to charities that to the than \$600 or contributions that the than \$100 or contributions that the than \$100 or contributions that the than \$100 or contributions to charities that the than \$100 or contributions that the than \$100 or contributions the than \$100 or contributions that the things the things that the things that the things that the things that the things the things the things the things the things the things that the things t		Describe what you contributed		s you ributed	Value			
Pai	t 6:	List Certain Losses								
15.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?									
	_	No Yes. Fill in the details.								
	how the loss occurred Inclu-			be any insurance coverage for the amount that insurance has paince claims on line 33 of Schedule A	d. List pending loss	of your	Value of property lost			
Pai	t 7:	List Certain Payments or Transfers	5							
16.	consu	n 1 year before you filed for bankru ulted about seeking bankruptcy or ple any attorneys, bankruptcy petition p	preparii	ng a bankruptcy petition?			rty to anyone you			
	_	No								
		es. Fill in the details.  on Who Was Paid		Description and value of any pr	operty Date	payment	Amount of			
	Addre Emai		ou′	transferred		ansfer was	payment			
	1576 Enci	cus Credit Counseling 60 Ventura Blvd. Suite 1240 ino, CA 91436 v.abacuscc.org		Pre-Filing Credit Counseling	g Course 6/9/2	2017	\$25.00			
17.	promi	n 1 year before you filed for bankru ised to help you deal with your cred t include any payment or transfer that	ditors o	r to make payments to your credi		fer any prope	rty to anyone who			
	_	No Yes. Fill in the details.								
		on Who Was Paid		Description and value of any pr transferred		payment ansfer was e	Amount of payment			

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Debtor 1 Dewey Anthony Lee
Debtor 2 Valerie M. Lee

Case number (if known) 17-12138

18.	Within 2 years before you filed for bankrupte transferred in the ordinary course of your build like the like transfers and transfers mainclude gifts and transfers that you have alread No	usiness or financial affa ade as security (such as	airs? the granting of a								
	☐ Yes. Fill in the details.										
	Person Who Received Transfer Address	Description and value of property transferred		payme	ibe any property or ents received or debts n exchange	Date transfer was made					
	Person's relationship to you				J						
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)										
	■ No  Yes. Fill in the details.										
	Name of trust	Description and	alue of the pro	perty trans	ferred	Date Transfer was					
						made					
Pai	tt 8: List of Certain Financial Accounts, Ins	struments, Safe Deposi	t Boxes, and S	torage Unit	S						
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred?	y, were any financial ac	counts or instr	uments he	ld in your name, or for y	our benefit, closed,					
	Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.										
	Yes. Fill in the details.										
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco instrument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer					
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?										
	■ No □ Yes. Fill in the details.										
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?					
22.	Have you stored property in a storage unit of	or place other than you	home within 1	year befor	e you filed for bankrupt	cy?					
	■ No										
	☐ Yes. Fill in the details.										
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?					
Pai	rt 9: Identify Property You Hold or Control	for Someone Fise									
23.			ude any proper	ty you borr	owed from, are storing	for, or hold in trust					
	■ No										
	Yes. Fill in the details.	When in the man	mt O	Danasika	the company and a	Walna					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value					
Pai	rt 10: Give Details About Environmental Info	ormation									
Ear	the nurness of Port 10, the following definition	ana anniu									

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 5

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 $toxic\ substances,\ wastes,\ or\ material\ into\ the\ air,\ land,\ soil,\ surface\ water,\ groundwater,\ or\ other\ medium,\ including\ statutes\ other\ other\$ 

Dewey Anthony Lee Debtor 1 Debtor 2 Valerie M. Lee

Case number (if known) 17-12138

	regu	liations controlling the cleanup of thes	se sui	ostances, wastes, or material.								
	to own, operate, or utilize it, including disposal sites.											
		<i>ardous material</i> means anything an env ardous material, pollutant, contaminant			wa	ste, hazardous substance, toxic	substance,					
Rep	ort a	Il notices, releases, and proceedings th	hat yo	ou know about, regardless of when	the	ey occurred.						
24.	Has	any governmental unit notified you that	at you	u may be liable or potentially liable	unc	ler or in violation of an environm	ental law?					
	■ No											
		Yes. Fill in the details.										
		me of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)	I	Environmental law, if you know it	Date of notice					
25.	Hav	e you notified any governmental unit o	f any	release of hazardous material?								
		■ No										
		Yes. Fill in the details.										
		me of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)	I	Environmental law, if you know it	Date of notice					
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.											
	■ No											
		Yes. Fill in the details.										
		se Title		Court or agency	Na	ture of the case	Status of the					
	Cas	se Number		Name Address (Number, Street, City, State and ZIP Code)			case					
Pai	rt 11:	Give Details About Your Business or	r Con	nections to Any Business								
27.	With	nin 4 years before you filed for bankrup	otcy, (	did you own a business or have an	y of	the following connections to any	/ business?					
	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?   A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time											
		☐ A member of a limited liability com	pany	(LLC) or limited liability partnershi	p (L	.LP)						
		☐ A partner in a partnership										
		☐ An officer, director, or managing ex	xecut	tive of a corporation								
		☐ An owner of at least 5% of the votin	ng or	equity securities of a corporation								
		No. None of the above applies. Go to	_									
		Yes. Check all that apply above and fil										
		siness Name		escribe the nature of the business		Employer Identification numbe	r					
		dress mber, Street, City, State and ZIP Code)	Na	me of accountant or bookkeeper		Do not include Social Security	number or ITIN.					
	Ì		110	ino or accountant or bookincoper		Dates business existed						
28.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.											
		No										
		Yes. Fill in the details below.										
		dress	Da	te Issued								
	(Nur	nber, Street, City, State and ZIP Code)										

Part 12: Sign Below

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Dewey Anthony Lee Debtor 1 Case number (if known) 17-12138 Debtor 2 Valerie M. Lee are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Dewey Anthony Lee /s/ Valerie M. Lee Valerie M. Lee Dewey Anthony Lee Signature of Debtor 1 Signature of Debtor 2 Date June 23, 2017 Date June 23, 2017 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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B2030 (Form 2030) (12/15)

### United States Bankruptcy Court Northern Mississippi District

In re	Dewey Anthony Lee Valerie M. Lee		Case No.	17-12138			
		Debtor(s)	Chapter	13			
	DISCLOSURE OF COMPENSATI	ON OF ATTOI	RNEY FOR DE	BTOR(S)			
co	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that ompensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:						
	For legal services, I have agreed to accept		\$	3,400.00			
	Prior to the filing of this statement I have received			0.00			
	Balance Due		\$	3,400.00			
2. T	The source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
3. Т	The source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
<b>4</b> . ■	I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm						
[	☐ I have agreed to share the above-disclosed compensation with copy of the agreement, together with a list of the names of the						
5. I	n return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
b c	a. Analysis of the debtor's financial situation, and rendering advib. Preparation and filing of any petition, schedules, statement of Representation of the debtor at the meeting of creditors and cod. [Other provisions as needed]  Negotiations with secured creditors to reduce to reaffirmation agreements and applications as no 522(f)(2)(A) for avoidance of liens on household	affairs and plan which nfirmation hearing, and o market value; exc peded; preparation	n may be required; and any adjourned hear emption planning;	ings thereof;  preparation and filing of			
6. E	By agreement with the debtor(s), the above-disclosed fee does not Representation of the debtors in any discharged any other adversary proceeding.			es, relief from stay actions or			
	CERT	IFICATION					
	I certify that the foregoing is a complete statement of any agreement of a supplication of a supplicatio	ent or arrangement for	payment to me for re	presentation of the debtor(s) in			
	<b>une 23, 2017</b> Date	/s/ William C. Cui William C. Cunni					

Signature of Attorney
William C. Cunningham

817 2nd Avenue North Columbus, MS 39703

wccsinc@gmail.com
Name of law firm

662-329-2455 Fax: 662-329-4411

P.O. Box 624

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### United States Bankruptcy Court Northern Mississippi District

In re	Valerie M. Lee		Case No. Chapter	17-12138				
		Debtor(s)		13				
	VERIFICATION OF CREDITOR MATRIX							
The abo	ove-named Debtors hereby verify that the	he attached list of creditors is true and c	correct to the best of	of their knowledge.				

/s/ Dewey Anthony Lee
Dewey Anthony Lee
Signature of Debtor

/s/ Valerie M. Lee Valerie M. Lee Signature of Debtor

Dewey Anthony Lee

Date: June 23, 2017

Date: June 23, 2017

Alliance Collection Serv. 600 W. Main St. Suite A Tupelo, MS 38802

Altair OH XIII, LLC c/o Weinstein, Pinson and Riley, PS 2001 Western Avenue, Suite 400 Seattle, WA 98121

Atlas Acquisitions, LLC. 294 Union Street Hackensack, NJ 07601

Badcock Furniture 416 Highway 12 W Starkville, MS 39759

Baptist Memorial Hospital P.O. Box 6200 Columbus, MS 39705

Capital One P.O. Box 85149 Richmond, VA 23295-0001

Cerastes, LLC 2001 Western Avenue Suite 43 Seattle, WA 98121

Check Advance 952 W Main Street Louisville, MS 39339

Cornerstone Acceptance 3741 South Nova Road Port Orange, FL 32129

Credit Acceptance P.O. Box 513 Southfield, MI 48037 Enhanced Recovery Corporation 8014 Bayberry Rd Jacksonville, FL 32256

First Heritage Credit 110 North WalMart Drive #C Louisville, MS 39339

Franklin Collection Service P.O. Box 3910 Tupelo, MS 38803

GM Financial P.O. Box 183834 Arlington, TX 76096

Hope Credit Union PO Box 22886 Jackson, MS 39225

Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19114

Jefferson Capital Systems, LLC P.O. Box 23051 Saint Cloud, MN 56303

Methodist Rehab 1350 East Woodrow Wilson Avenue Jackson, MS 39216

Midland Funding MCM Dept. 12421 P.O. Box 603 Oaks, PA 19456

MSCB P.O. Box 1567 Paris, TN 38242-1567

Navient P.O. Box 9533 Wilkes Barre, PA 18773 OCWEN
P.O. Box 6440
Carol Stream, IL 60197-6440

Patient Account Services 1300 Riverplace Blvd Suite 300 Jacksonville, FL 32207

Portfolio Recovery Associates, LLC Post Office Box 12914 Norfolk, VA 23541-2914

Quantum3 Group LLC P.O. Box 788 Kirkland, WA 98083

Resurgent Capital Services P.O. Box 129
Thorofare, NJ 08086-0129

Revenue Recovery Corporation 6207 Summer Avenue P.O. Box 341308 Memphis, TN 38184-1308

S&K Door Specialty Co. P.O. Box 1414 Starkville, MS 39760

Santander Consumer P.O. Box 660633 Dallas, TX 75266-0633

Smith, Rouchon & Associates 1456 Ellis Ave Jackson, MS 39204

Speedy Cash 3611 North Ridge Road Suite 101 Wichita, KS 67205 Spiller Furniture P.O. Box 20824 Tuscaloosa, AL 35402-0824

ST DOMINIC HOSPITAL 969 LAKELAND DRIVE Jackson, MS 39216

Student Assistance Corporation P.O. Box 9570 Wilkes Barre, PA 18773-9570

Tupelo Service Finance 1040 Cliff Gookin Blvd, Suite 1 P.O. Box 1791 Tupelo, MS 38802

U.S. Attorney 900 Jefferson Ave Oxford, MS 38655

US Department of Education P.O. Box 5609 Greenville, TX 75403

Weinstein, Pinson, & Riley 2001 Western Avenue Suite 400 Seattle, WA 98121